the necessity of doing things economically and yet of taking care of the "boys."

In States like New York, where there is long experience, and a wealthy State behind the asylums there is less excuse for deficiency in management.

I will only state the points which most impress me:

There is great lack of sound psychological knowledge, an utter deficiency in knowledge of cerebro-spinal anatomy and physiology and a most dead and hopeless attitude therapeutically towards the patients. Furthermore, there is no thorough knowledge of nerve pathology among asylum alienists. I think that an alienist who is at all a qualified man should be a fair neurologist and pathologist, should know modern psychology and should be a hopeful therapeutist.

Isn't this a large enough indictment? To it, however, the answer may be justly made that asylum managers do not pay enough to secure such men. I should add that there are a number of asylum men who do possess the requirements which are so generally lacking.

Yours truly,

CHARLES L. DANA.

FROM DR. F. X. DERCUM.

January 27, 1894.

Dear Doctor Mitchell:

Your letter in reference to hospitals for the insane has suggested the following thoughts to me:

First, in relation to attendants. Attendants, especially those in State and other public hospitals, are not recruited from a very high class of men and women. When we reflect upon the pecuniary inducement that is offered (about $19 a month) we can not be surprised to find this the case. It is to be wondered at that anyone should for such pay be willing to discharge duties, exacting, onerous and often exceedingly unpleasant. Surely if any position requires qualities of a high order, gentleness, tact, good judgment, firmness, courage, and above all self-control, it is that of asylum attendant. Again, little or no systematic effort is made to train men and women for the duties of such positions. Nothing comparable to a nurses' training school exists, to my knowledge, in any of the insane hospitals. I know of none in

which a systematic course of lectures, or any other technical instruction is given to attendants. Surely attendants should be taught some of the elementary principles of nursing, should be taught in what manner to deal with the insane,—how to deal with the delusional lunatic, how to handle a case of mania or of melancholia. Of course, such points as relate to holding and feeding they learn by practical experience, but it is often at the expense of their patients. Further, the number of patients assigned to an attendant in an insanse asylum has always seemed to me to be excessively large. If my recollection serves me right, the proportion is generally one attendant to eighteen or twenty patients. A few insane asylums that happen to be attached to other hospitals, such as the one attached to the Boston General Hospital, have the benefit, incidentally, of trained nursing. This was the case also for a time in the insane department of the Philadelphia Hospital; in the latter, however, the nurses were admitted to the female department only.

Secondly, in relation to remedial measures. In addition to the seclusion, the isolation, or the proper grouping of patients, and the efforts that have been made in various hospitals to introduce occupations and amusements for the insane, various other remedial measures might be carried out. It has always seemed to me that hydrotherapy might find some application in hospitals for the insane. It is a comparatively inexpensive method of treatment and of its calmative and tonic effect there can be no question. Indeed, the simple substitution of rain or shower-baths for the full bath system, now in vogue, would be a distinct gain. The shower-bath offers in a modified way much that can be otherwise gained only by massage. The bath might be so arranged as to yield every advantage of hydrotherapy. The jet, fan and needle douches could easily be applied. Further, it is absolutely without danger. It would not be possible for a patient to drown in a shower-bath. Again, I have no doubt it would also save time where the attendants have many patients to bathe.

It has also seemed to me that every hospital for the insane ought to have attached to it a number of masseurs, or, at least, a number of attendants able to give massage. There can be no doubt that in some of the curable insanities, especially such as are associated with great depression of nutrition, massage would be of value. Further, although we are well aware that the "rest-cure"

is not of itself successful in treating insanity there can be no doubt that there is abundant opportunity in insane asylums for the advantageous application of its principles.

A distinct advance has been made in some of our State hospitals in the setting aside of certain wards or buildings as infirmaries. In this connection it has also suggested itself to me that the detailed medical work required is in excess by far of the number of physicians usually attached to one hospital. This is not said in a spirit of criticism of the work as done, but there can be no doubt that greater good could be accomplished if the patients of an asylum could get more of the individual attention of the physician. Surely a percentage of the insanities are curable and every effort should be made to save this percentage. No matter how great the skill, how exalted the purpose, how sincere the devotion of the asylum physician may be, it is self-evident that it is impossible for him to give detailed attention to hundreds of patients in a day.

Finally, much might be said in the matter of occupation and of out-door life for the insane. Occupation should be prescribed for the patient just as any other remedial measure and should be extended to all who are physically capable. As much as possible, the season permitting, this occupation should be out of doors. It has seemed to me that the principle already applied in farms for the epileptics should find a more extended application in farms for the insane.

I am well aware that some of the beneficial measures which could be added to the asylums might increase the cost of maintaining the insane. If the latter are simply to be maintained in huge board-houses, or dormitories, and their isolation from the community be the only object, then, of course, the question of cost should be paramount. But if the institutions are to be run upon the basis of hospitals—are to be managed as institutions for treatment—certainly the question of increased cost should find no place in the minds of those who determine the use of the public monies.

Yours very sincerely,

F. X. DERCUM.